

Positive Thinking and Effective Communication: an Approach to Improved Pain Management

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Objectives:

- Examine the effect of chronic pain on thinking processes and promoting positive thinking
- Incorporate acceptance and commitment to therapy as part of routine pain management
- Discuss effective communication techniques in a pain setting

The Three Dimensions of Pain

1. Sensory

- > Where is this pain and how severe is it?
- > Spine and brain

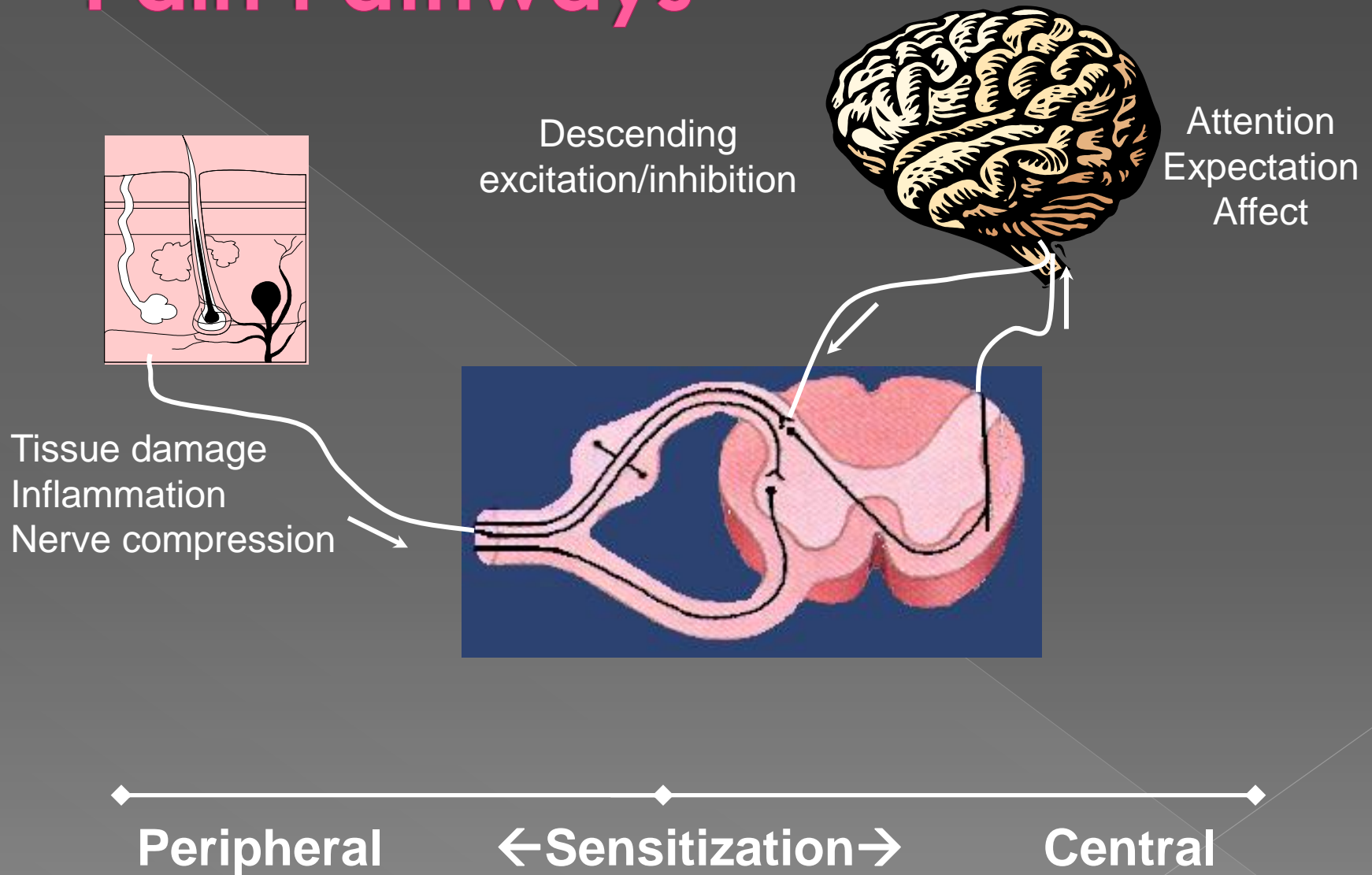
2. Cognitive

- > What does it mean? Will attending to it be useful?
- > Area of body to brain and back

3. Affective

- > How does this pain make you feel? Should you worry about it?
How much will you suffer because of it?
- > Brain chemicals, rewiring

Pain Pathways



Positive Thinking

- ◎ The brain only processes the positive; it doesn't process negation.
- ◎ Use positive questions
 - > “What makes you feel better?”
 - > “What is good about your life?”
- ◎ Positive imagery
 - > Doing something successfully
 - > “What would you like to happen?”

Chemical Influences on Pain Processing

More Pain

- Substance P
- Glutamate and EAA
- Serotonin (5HT_{2a, 3a})
- Nerve Growth Factor
- CCK

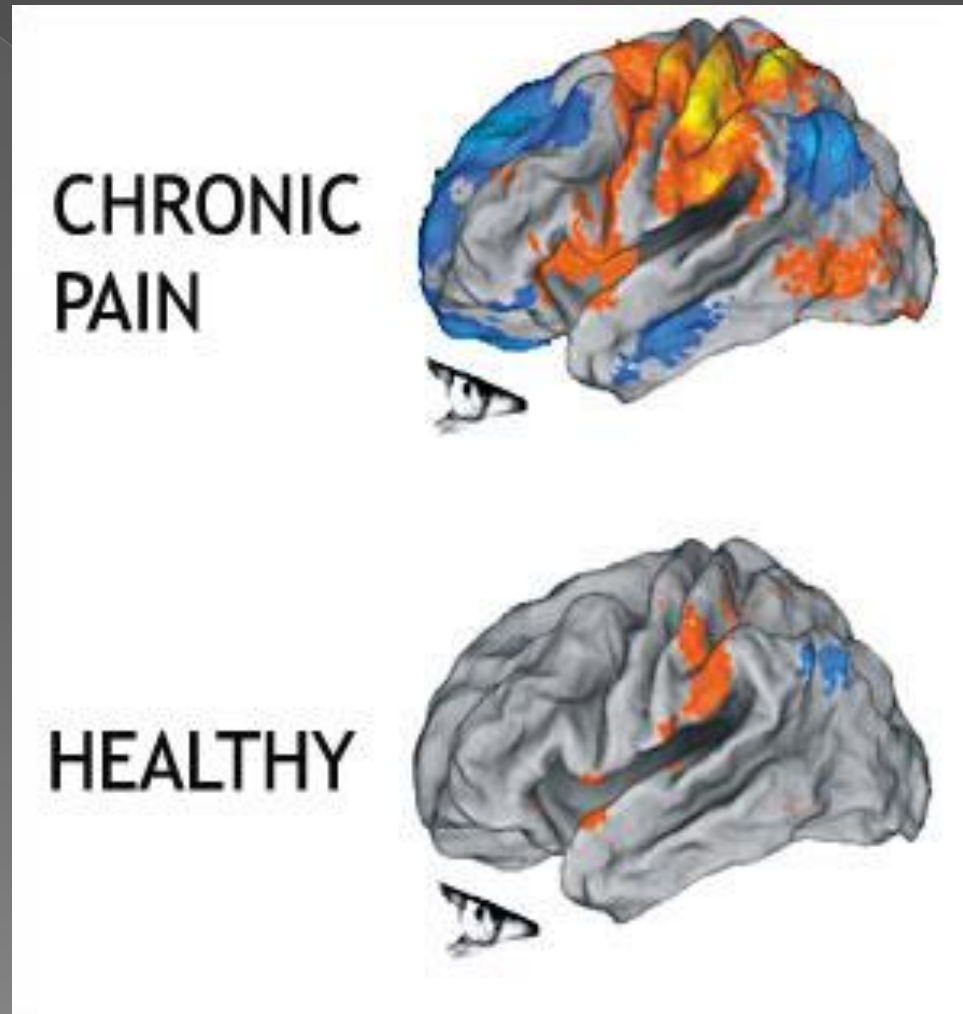


Less Pain

- Norepinephrine
- Serotonin (5HT_{1a,b})
- Dopamine
- Opioids
- GABA
- Cannabinoids
- Adenosine



fMRI Brain Changes in Chronic Pain



There is No Cure for Chronic Pain

BUT ...You can make your patient more functional

AND ...You can feel better about having them as your patient

ACT - Acceptance and Commitment Therapy

- ⦿ “This is who I am now ...and I’m ok with it.”
- ⦿ Reduce the tendency to wish for the pain free past.
 - > Do the best with what we have
- ⦿ Allowing thoughts about their condition to come and go without struggling with them.
 - > Try and replace anger/resentment etc
- ⦿ Discovering values most important to one's true self.
- ⦿ Setting appropriate goals according to those values.

It's Not Just WHAT You Say — It's HOW You Say It ...

- Most of the information transmitted in a medical visit is immediately forgotten by the patient, or incorrectly remembered
- ◉ The impact of communication is influenced as follows:
 - > Verbal??

Impact of Communication

- ◉ **Words 7%**
- ◉ **Tonality 38%:**
 - > Tone (pitch)
 - > Tempo (speed)
 - > Timbre (quality)
 - > Volume (loudness)
- **Physiology 55%:**
 - Posture
 - Gesture
 - Facial expression and blinking
 - Breathing
 - Proximity and touch

Rapport

- ◉ Establishing rapport with a patient is giving them the experience of being understood
- ◉ When people are like each other, they will like each other
- ◉ Rapport is established by **matching and mirroring**:
 - > **Physical mirroring** of the individual's physiology
 - > Match their **voice**
 - > Match their **breathing**
 - > Match the **size of the pieces of information** (chunk size or level of abstraction) they deal with
 - > Match and be aware of their **common experiences**

How Can We Enhance Communication?

Active Listening

- ◉ Listen to 3 to 5 uninterrupted sentences
 - > 90 second rule
 - ◉ Face and look at your patient
 - ◉ Nod and make eye contact
- > **Tip:** Putting your pen, mouse, or keyboard down lets the patient know you are listening. Once information has been shared, notes can be captured!

Are Patients Really Being Listened to?

- About 3/4 of patients are interrupted by their physician when trying to address their concerns¹⁻³
- On average, this interruption occurs after only 12 to 23 seconds¹⁻⁴
- Most patients would have finished in under 1 minute, not taking longer than 2.5 minutes¹
- In fact, patients allowed to complete their opening statements used only 6 seconds more than those who were interrupted²
- Once redirected, the descriptions are rarely completed²

1. Beckman HB, et al. *Ann Intern Med.* 1984;101(5):692-6.

2. Marvel MK, et al. *JAMA.* 1999;281(3):283-7.

3. Dyche L, et al. *J Gen Intern Med.* 2005;20(3):267-70.

4. Rhoades DR, et al. *Fam Med.* 2001;33(7):528-32.

How Can We Enhance Communication?

Address the Patient's Agenda

- Demonstrate that you understand the patient's symptoms/condition
- Provide detailed explanations of what is happening and why
- Slow down, keep it simple, and tell the truth
- Say what you mean, and mean what you say!
- Present options to the patient
- Summarize and establish agreement on goals of individual visit and medical care
- Active self-management is crucial

How Can We Enhance Communication?

Demonstrate Empathy using positive thinking

- Reflection: “I can see that you are ...”
 - Legitimization: “I can understand why you feel ...”
 - Support: “I want to help”
 - Respect: “You’re doing great”
 - Partnership: “Let’s work together ...”
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- There is fine line between empathy and agreement, and often in an attempt to be empathic we unintentionally and unconsciously communicate agreement

How Can We Reach Function for Pain Patients?

Techniques

- ◉ Goal orientation
 - > Create small manageable goals
 - > Involve patient in setting goals → self-accountability
 - > Rather than having the patient discuss what they can't do, use positive thinking to have them focus on what they CAN do
 - > This will influence the way the patient feels and lead to positive outcomes

Goal/Function Orientation

- ◎ The SMART Model provides a very useful framework to develop goals and outcomes
 - > **S** – Specific, Small steps⁺ Stated in the Positive + Sensory-Based
 - > **M** – Measurable⁺ Meaningful
 - > **A** – Attainable⁺ “As If” + Actionable
 - > **R** – Realistic/Reasonable⁺ Relevant +Accept that Pain is Included
 - > **T** – Time-bound or Timely⁺ Toward the Future
 - > **E** – Evaluate, Enthusiasm⁺Weekly +Self-talk
 - > **R** – Reward and/or Reset

Questions?